

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVN4971PRI</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>08/28/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>LOVELOCK CORRECTIONAL CENTER</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1200 PRISON RD LOVELOCK, NV 89419</b>		
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S 000	<p>Initial Comments</p> <p>This Statement of Deficiencies was generated as a result of survey conducted at your facility from 8/20/09 to 8/28/09 in accordance with the Nevada Revised Statutes (NRS) 209.382(1). NRS 209.382 State Health Officer to examine and report on medical and dental services, diet of offenders, sanitation and safety in institutions and facilities.</p> <p>1. The State Health Officer shall periodically examine and shall report to the Board semiannually upon the following operations of the Department:</p> <p>(a) The medical and dental services and places where they are provided, based upon the standards for medical facilities as provided in chapter 449 of NRS. (b) The nutritional adequacy of the diet of incarcerated offenders taking into account the religious or medical dietary needs of an offender and the adjustment of dietary allowances for age, sex and level of activity. (c) The sanitation, healthfulness, cleanliness and safety of its various institutions and facilities. The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p>	S 000		
S 126	<p>NAC 449.327 Sterile Supplies and Medical Equipment</p> <p>2. A hospital which prepares, sterilizes and stores its supplies and equipment directly shall develop systems and standards that are consistent with:</p> <p>(a) The standards for the control of infection established by the infection control officer of the hospital</p>	S 126		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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S 126	<p>Continued From page 1</p> <p>This Regulation is not met as evidenced by: Based on observation, record review and interview on 8/20/09, the facility was not following policy and procedures regarding the sterilization of instruments.</p> <p>Findings include:</p> <p>A 4/1/09 policy titled, "Sterilization of medical and dental instruments" was reviewed. The policy indicated that biological testing was to be done at a minimum of once a week to ensure the proper function of the sterilization equipment. The policy indicated the self-sealed pouches were to be labeled with the contents of the pouch and the date of the sterilization. The policy further indicated that Attest ampoules were to be run weekly to determine the efficiency of the sterilizer and the test results were to be logged. The policy also revealed the sterilizer was to receive monthly maintenance to prevent the unit from failing prematurely. The dental technician reported she did not use biological indicators, but only relied on the indicator strip on the self-sealed pouches to determine whether the instruments were sterile or not. The pouches were not labeled according to the policy. The dental technician was also interviewed about the maintenance schedule of the sterilizer and she reported the machine had been in use since she began employment in 1999 and that the sterilizer had never been serviced.</p> <p>Multiple wrapped instruments in self-sealed pouches were observed laying in a pan. The pan was laying in the left hand side of a sink. There were water drops on the surfaces of the self-sealed pouches affecting the integrity of the paper backing. A policy titled, "Sterilization of medical and dental instruments" was reviewed. The policy indicated that all clean and dried</p>	S 126			

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S 126	Continued From page 2  instruments were to be placed in an appropriately sized self-seal pouch.	S 126		
S 128	NAC 449.327 Sterile Supplies and Medical Equipment  2. A hospital which prepares, sterilizes and stores its supplies and equipment directly shall develop systems and standards that are consistent with: (c) When applicable, the manufacturer's guidelines for the use and maintenance of the equipment. This Regulation is not met as evidenced by: Based on observation and record review on 8/20/09, the facility was not following manufacturer's guidelines for the use and maintenance of the sterilizer equipment.  Findings include:  Multiple instrument packs were observed. All of the instruments (clamps, scissors, etc.) inside the sterile packages were in the closed position.  Review of the autoclave operation manual revealed instructions that all instruments should be in an open position when sterilized.	S 128		
S 129	NAC 449.327 Sterile Supplies and Medical Equipment  3. If the supplies and equipment are sterilized on the premises of a hospital, the process of sterilization must be supervised by a person who has received specialized training in the operation of the process of sterilization, including training in methods of testing the process to verify the efficiency of the process of sterilization.	S 129		

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S 129	Continued From page 3  This Regulation is not met as evidenced by: Based on interview on 8/20/09, the person responsible for sterilizing instruments had no evidence of training on how to sterilize instruments.  Findings include:  The dental technician was interviewed regarding the sterilization of instruments. The dental technician reported she had not been formally trained on how to operate the sterilizers. She reported that someone pointed at the autoclave and said, "Here's the machine."  In addition, the dental technician was relying on an outdated 2001 policy and procedure for sterilizing instruments when there was an updated policy dated 4/1/09.	S 129			
S 181	NAC 449.3385 Dietary Personnel  2. The dietary service must be under the direction of a registered dietitian or other professional person who; (a) Is qualified in the field of institutional management, nutritional sciences or hotel restaurant management; (b) Has completed an academic program in culinary arts; or (c) Is certified as a dietary manager by the Dietary Managers Association and has additional work experience with medical and therapeutic diets. 3. The director of the dietary service may be employed on a full-time or part-time basis, or as a consultant.  This Regulation is not met as evidenced by:	S 181			

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S 181	Continued From page 4  Based on record review and interview on 8/20/09, the correctional facility did not ensure the culinary department was under the direction of a registered dietitian.  Findings include: There was no documentation that in-service training for food service personnel had been provided by the dietitian consultant. Staff stated that the dietitian did not conduct in-service trainings for culinary staff for safe and sanitary food handling practices because she had never been to the correctional center and only reviewed menus for nutritional adequacy.	S 181			
S 255	NAC 449.349 Emergency Services  1. A hospital shall meet the emergency needs of its patients in accordance with nationally recognized standards of practice.  This Regulation is not met as evidenced by: Based on record review on 8/20/09, the facility failed to check the contents of the emergency crash cart 3 out of the past 12 months.  Findings include:  The policy titled, "Medical Emergency Cart" was reviewed. The policy revealed the contents of the emergency crash cart were to be checked monthly.  The emergency crash cart log was reviewed. The log indicated that daily checks were made to verify the integrity of the seal, but the log indicated that no one checked the contents of the crash cart during the months of January, March and May of 2009 per policy.	S 255			

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S 339	Continued From page 5	S 339		
S 339	<p>NAC 449.363 Personel Policies</p> <p>4. The hospital shall have evidence of a current license or certification on file at the hospital for each person employed by the hospital, or under contract with the hospital, who is required to be licensed or certified by law to perform his job. This Regulation is not met as evidenced by: NRS 652.210 Manipulation for collection of specimens; authorized practices of technical personnel.</p> <p>1. Except as otherwise provided in subsection 2 and NRS 126.121 no person other than a licensed physician, a licensed optometrist, a licensed practical nurse, a registered nurse, a physician assistant licensed pursuant to chapter 630 or 633 of NRS, a certified intermediate emergency medical technician, a certified advanced emergency medical technician, a practitioner of respiratory care licensed pursuant to chapter 630 of NRS or a licensed dentist may manipulate a person for the collection of specimens.</p> <p>2. The technical personnel of a laboratory may collect blood, remove stomach contents, perform certain diagnostic skin tests or field blood tests or collect material for smears and cultures. (Added to NRS by 1967, 928; A 1991, 375; 1993, 2842; 1997, 689; 1999, 1916 ;2001,; 2005, 2517 ;2007, 1530, 1847</p> <p>NAC 652.472 Minimal requirements for new employees. (NRS 652.123, 652.125; 652.130) Technical personnel newly employed in a private registered laboratory must be certified as at least an office laboratory assistant. If the person requires training to reach that level, the prospective assistant must apply as an office laboratory trainee and perform those duties for not more than 6 months. Upon the recommendation of the office operator, the</p>	S 339		

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S 339	Continued From page 6  trainee shall formally apply for certification as an office laboratory assistant.  Based on record review on 8/20/09, the correctional center did not ensure that 1 of 1 employees met the requirements to collect blood specimens as required by NRS 652.210 through NRS 652.472.  Findings include:  Employee #16 - Review of the employee's file revealed no evidence of certification as a office laboratory assistant. In interview, Employee #16 stated she was not certified to perform phlebotomy but performed it as a part of her assigned job duties. In interview, the director of the facility's medical unit stated that he knew she was not certified to draw blood but that as she was licensed to inject radiological diagnostic testing dyes, she was qualified to perform phlebotomy for the purpose of collecting blood specimens.	S 339			
S 340	NAC 449.363 Personnel Policies  5. The hospital shall ensure that the health records of its employees contain documented evidence of surveillance and testing of those employees for tuberculosis in accordance with chapter 441A of NAC. This Regulation is not met as evidenced by: NAC 441A.370 Correctional facilities: Testing and surveillance of employees and inmates; investigation for contacts; course of preventive treatment for person with tuberculosis infection; documentation. (NRS 441A.120.) 1. An employee of a correctional facility who does not have a documented history of a positive	S 340			

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S 340	Continued From page 7  tuberculosis screening test shall submit to such test upon initial employment by the correctional facility. 2. An inmate who is expected to remain in a correctional facility for at least 6 continuous months and who does not have a documented history of a positive tuberculosis screening test shall submit to such test upon initial detention in the correctional facility. 3. If a tuberculosis screening test administered pursuant to subsection 1 or 2 is negative, the person shall be retested annually. 4. If a skin test administered pursuant to subsection 1 or 2 is positive or if the person has a documented history of a positive tuberculosis screening test and has not completed an adequate course of medical treatment, the person shall submit to a chest X ray and a medical evaluation to determine the presence of active tuberculosis. 5. Surveillance of employees of a correctional facility and inmates must be maintained for the purpose of identifying any development of symptoms of active tuberculosis. If active tuberculosis is suspected or diagnosed, the case or suspected case must be cared for in a manner consistent with the provisions of NAC 441A.375. 6. If a case having active tuberculosis is located in a correctional facility, the medical staff of the correctional facility shall carry out an investigation for contacts in a manner consistent with the provisions of NAC 441A.355. 7. A person who has tuberculosis infection but does not have active tuberculosis must be offered a course of preventive treatment unless medically contraindicated. 8. Any action carried out pursuant to this section and the results thereof must be documented in the person ' s medical record.	S 340		

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S 340	Continued From page 8  Based on record review 8/28/09, the correctional center did not ensure that 4 of 12 medical staff were in compliance with NAC 441A.370  Findings include:  Employee #2: Review of the personnel file revealed a one-step TB skin test done in January of 2009, but not the required second-step TB skin test.  Employee #6: Review of the personnel file revealed no annual TB skin test for 2009.  Employee #10: Review of the personnel file revealed no annual TB skin test for 2009.  Employee #12: Review of the personnel file revealed a one-step TB skin test done in January of 2009, but not the required second-step TB skin test.	S 340			
S 523	NAC 449.379 Medical Records  8. All medical records must document the following information, as appropriate: (e) Properly executed informed consent for all procedures and treatments specified by the medical staff, or federal or state law, as requiring written patient consent. This Regulation is not met as evidenced by: Based on record review on 8/20/09, the facility failed to obtain consents for 2 of 20 inmates.  Findings include:  Inmate #9 and #10 were receiving psychotropic medications (Elavil, Thorazine and Depakote), but consents allowing the facility to administer psychotropic medications were missing from their	S 523			

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S 523	Continued From page 9  files. Other inmates receiving psychotropic medications had the appropriate consents in their files.	S 523		
S 590	NAC 449.391 Dental Services  1. If a hospital provides dental services, the services must be well-organized and provided in accordance with nationally recognized standards of practice. This Regulation is not met as evidenced by: Based on observation, interview and record review on 8/20/09, the facility failed to follow its policy on tool control in the dental unit.  Findings include:  A policy titled, "Tool Control Procedure" was reviewed. The policy indicated that medical department tools did not have to be marked, but the tools still fell under the daily, weekly and monthly inventory guidelines.  Multiple dental tools and instruments were observed in the dental unit. The dental technician was unable to provide an accountability log for the dental tools because she reported she did not know she needed to maintain an accountability log.	S 590		

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